

APPLICATION AS FILED - PART I

		(Column 2)
FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE (37 CFR 1.16(a), (b), or (c))		
SEARCH FEE (37 CFR 1.16(a), (f), or (g))		
EXAMINATION FEE (37 CFR 1.16(a), (d), or (e))		
TOTAL CLAIMS (37 CFR 1.16(f))	minus 20 =	
INDEPENDENT CLAIMS (37 CFR 1.16(f))	minus 8 =	
APPLICATION SIZE FEE (37 CFR 1.16(e))	<p>If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(e).</p>	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(g))		

SMALL ENTITY	
RATE (\$)	FEE (\$)
X	
X	
TOTAL	

OR

OTHER THAN  
SMALL ENTITY

	RATE (%)	FE (%)
X	=	
X	=	
TOTAL		

\* If the difference in column 1 is less than zero, enter "0" in column 2.

APPLICATION AS AMENDED - PART II

APPLICATION AS AMENDED - PART II				
2/15/07 (Column 1)		(Column 2)	(Column 3)	
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	
	Total (37 CFR 1.160)	4	Minus	37 = 4
	Independent (37 CFR 1.160)	0	Minus	0 = 0
Application Size Fee (37 CFR 1.16(e))				
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.160)				

SMALL ENTITY	
RATE (%)	ADDITIONAL FEE (\$)
x 25 =	
x 100 =	
TOTAL ADD'L FEE	

OTHER THAN SMALL ENTITY	
RATE (\$)	ADDITIONAL FEE (\$)
X 50 =	700
X 30 =	
TOTAL ADDL FEE	

AMENDMENT B	(Column 1)	(Column 2)	(Column 3)
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total (27 CFR 1.160)	*	Minus	**
Independent (27 CFR 1.160)	*	Minus	**
Application Size Fee (27 CFR 1.16(e))			
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (27 CFR 1.160)			

RATE (\$)		ADDITIONAL FEE (\$)
X	=	
X	=	
TOTAL ADD'L FEE		

	RATE (\$)	ADDITIONAL FEE (\$)
OR	X	
OR	X	
OR		
OR	TOTAL ADD'L FEE	

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  
 \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".  
 \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 8, enter "8".

**USPTO**  
**Address: SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.**

If you need assistance in completing the form, call 1-800-PTO-9188 and select option 2.